



Montana Youth Leadership Forum

www.montanaylf.org

VOLUNTEER STAFF APPLICATION

Deadline – March 30, 2012

Staff Dates: Sunday July 15, 2012, through Friday, July 20, 2012

NAME: _____ Date: _____

Mailing Address: _____

Telephone: _____ E-mail: _____ Fax: _____

Telephone (cellular): _____ Telephone (work) : _____

=====

Applicant YLF Status, Check All that apply:

____ New Staff Applicant

____ YLF Alumini, if checked year attended YLF _____

____ Former YLF staff member, if checked year(s) on staff _____, _____, _____, _____

Position Desired: (Check those areas of interest and expertise)

Small/Large Group Facilitator _____ Co-Facilitator _____

Mentor/Peer Facilitator _____ Support Services _____

Other/Rover _____

=====

Background check information

Social Security Number _____

Birthday: _____

The above information will only be used to do a criminal background check as required by Montana State laws pertaining to volunteers who work with minors. By signing below you give the MYLF Advisory Council permission to conduct the background checks as necessary for your participation in the 2012 YLF.

Signature

Date

EDUCATION

High School: _____ Dates: _____ Course of Study: _____

Post High School _____ Dates: _____ Course of Study: _____

Post High School _____ Dates: _____ Course of Study: _____

WORK HISTORY

Employer: _____ Dates: _____ Position: _____

Employer: _____ Dates: _____ Position: _____

EXPERIENCE WITH INDIVIDUALS WITH DISABILITIES (include any previous YLF staffs)

SPECIAL INTEREST, TALENTS AND ABILITIES

REFERENCES (please list three, include telephone number)

****References are only required for first-time applicants for staff positions of MYLF.**

If selected I will be available for all staff training and other designated/assigned responsibilities as a staff member for the Youth Leadership Forum beginning at 1:00 p.m., Sunday, July 15, 2012 through 12:00 p.m., Friday, July 20, 2012. I also agree to follow all Carroll College resident hall rules and regulations pertaining to my participation in YLF.

Signature

Date

If you will have any accessibility or accommodation needs during the week, please describe below.

(If you have **no** accessibility or accommodation requirements, please indicate such by a negative response.)



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**WE'RE INVITING FUTURE COMMUNITY LEADERS
TO ATTEND THE ANNUAL MONTANA YOUTH LEADERSHIP
FORUM (MYLF) FOR STUDENTS WITH DISABILITIES**

July 16-20, 2012

Location – Carroll College, Helena, MT

*Twenty high school sophomores, juniors and seniors will be selected.

*No expense to selected delegates (**all expenses paid**).

*Exciting, fun, and educational four-day training program.

**APPLICATION FORMS MUST BE POSTMARKED BY
March 30, 2012**

*Students must complete all information of this application.

*Please type or print with black ink.

*Mail the application to the address on the last page (page 6).

*Please see page 5 for additional application instructions.

1. Last Name

First

Middle

2. Address

City

ZIP

3. Male / Female

4. Phone

5. Name of High School

6. Grade Level on 12/31/11

7. Your E-Mail Address

8. Birth Date

9. Date Graduation Expected

10. School Phone Number

11. Your Ethnicity

12. Please describe your disability. This information will assist in assuring that we include delegates with a diversity of disabilities.

Disability (medical diagnosis) _____

Onset of disability: _____

Check all that apply:

Deaf _____

Hard of Hearing _____

I use sign language _____

I use real time captioning _____

I use lip reading _____

Blind _____

Visual Impairment _____

I read with Braille _____

I read with large print _____

Orthopedic Disability _____

I use a wheelchair _____

I cannot walk upstairs _____

I cannot walk long distances _____

Developmental Disability _____

Describe _____

Autism _____

Traumatic Brain Injury _____

Other _____

Mental Health Disability _____

Neuromuscular Disability _____

Learning Disability _____

Multiple Disabilities _____

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13. Information on Vocational Rehabilitation

If you are currently a client of Vocational Rehabilitation, please tell us your
Counselor's Name _____ Phone _____

14. School and Community Involvement

Below, please briefly list your involvement with your school and community. This may include any offices held, club memberships, after school activities or work experience.

Activity	Adult Contact	Dates Involved	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. Letters of recommendation

Please attach two letters of recommendation which describe your demonstrated leadership skills or your leadership potential. One letter **MUST** be from a high school representative and one **MUST** be from a community representative outside your school.

List name, position/title, organization and telephone number of your recommendations.

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16. Required Essay

Your answers to the following questions will be used to assess your readiness to participate in the Leadership Forum. Please write your responses on a separate sheet of paper and attach to your completed application packet. Your total response for all four of these topics should not exceed four (4) typewritten, double-spaced sheets. (Responses must be double-spaced and either typewritten or printed in black ink.)

A. Qualifications – explain why you feel you are qualified to be a delegate to this forum and please tell us why you want to attend.

B. Positive Influences – In terms of leadership, please tell us about two people who have positively influenced your life. Why? (Families, teachers, counselors, friends, public officials, or celebrities are appropriate examples.)

C. Experiences as a person with a disability – Describe two important experiences you have had as a person with a disability. (Please be specific about your examples as they relate to your disability.)

D. Future Plans – Describe any of your plans for after high school.

17. Please use the checklist below to make certain your application packet is complete. All questions must be answered and requested letters and information provided.

- a. Application form _____
- b. Two letters of recommendation _____
- c. Essay responding to four topics _____

Student Signature

Date

KEEP THIS PAGE – DO NOT RETURN WITH APPLICATION

Mail Completed Applications to:

MYLF

1617 Euclid Ave. Suite 1

Helena, MT 59601

HOW STUDENT DELEGATES WILL BE SELECTED AND APPLICATION INSTRUCTIONS FOR STUDENTS.

1. To be eligible for the Montana Youth Leadership Forum for Students with Disabilities, students must:
 - a. Have a disability (as defined by the ADA)
 - b. Be in the 9, 10, 11, or 12th grade as of December 31, 2011
 - c. Must have demonstrated leadership potential in school and community
 - d. Reside in Montana
2. Student applicants must mail the completed application packet to the MYLF office no later than March 30, 2012.
3. Selected applicants will be notified by letter no later than May 4, 2012.
4. After being selected, students will be asked to fill out a confirmation form, and provide additional information to the MYLF office.
5. **All appropriate expenses will be paid by the Montana Youth Leadership Forum (MYLF)**, including such expenses as travel, lodging, food, and interpreters for students who are deaf and personal assistants for students with physical disabilities.



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Request for Presenters

The Montana Youth Leadership Forum for Students with Disabilities is seeking applications for presentations for the Leadership Forum to be held July 16-20, 2012 on the campus of Carroll College in Helena, MT. Presenters should ideally be:

- ♦ Individuals with disabilities or affiliated closely with the disability community
- ♦ Individuals who have achieved a professional level in their chosen field
- ♦ Individuals who have exhibited leadership abilities
- ♦ Individuals with positive attitudes who enjoy spending time with young people
- ♦ Individuals with excellent communication skills

The Montana Youth Leadership Forum (MYLF) for Students with Disabilities is on a limited budget. Presenters are asked to volunteer their time to the Forum as an in-kind donation to this effort to empower youth with disabilities. Meals will be provided and lodging may be available on a limited basis. Application deadline is April 1, 2012.

Send completed applications to:

**June Hermanson, Project Director
MYLF
1617 Euclid Suite 1
Helena, MT 59601**



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**2012 Youth Leadership Forum
Presentation Application**
Application Deadline – April 1, 2012

Name(s) _____

Address _____

Daytime Phone: _____ **Evening Phone** _____

Title of Presentation _____

Presentation Abstract: (In 50 words or less, give a brief description of the presentation proposed.) Please type or print.

Lodging Requested ? **Yes** **No**

Presentation addresses the following topic:

Leadership _____ Self Esteem _____ Culture of Disability _____

Mentoring _____ Career/Education Goals _____ Leadership _____

Technology/Resource Development _____

Presentation Type:

- _____ Structured Talk - classroom style presentation
- _____ Panel Discussion - a group talk on a specific topic and answer questions from the audience
- _____ Poster/Slide/Video Presentation
- _____ Cracker Barrel - audience participates in the discussion with a facilitator leading the discussion
- _____ Workshop - an individual leads activities in which the audience participates and gains skills that can be used later

Length of Presentation _____

Equipment Needed _____



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MYLF Memorandum of Understanding

Tax ID# 81-0459042

Agency / Individual Name: _____

Address: _____

Phone: _____

Your resource commitment to the Montana Youth Leadership Forum for Students with Disabilities could come in the form of in-kind donations such as meeting room expenses, dorm room expenses, recreational activities, staff time to assist with the week's activities, bottled water, juice, disposable cameras, gift certificates, savings bonds, small items for a delegate "goody bag" such as: caps, pens, shirts, posters, etc. Please list below what resources you would like to commit to the Montana Youth Leadership Forum.

We wish to be partner to the Montana Youth Leadership Forum by providing the following:

Your financial contribution to the Montana Youth Leadership Forum for Students with Disabilities helps provide personal care attendants, interpreters, travel expenses, lodging, food, and training materials. Please indicate below how you would like your financial contribution to be used: (Checks can be made payable to NCILS – MYLF)

Signature of Authorized Person

Date

Please return your completed form to: June Hermanson
Montana Youth Leadership Forum
16171 Euclid Suite 1
Helena, MT 59601
406.442.2576

